.

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO. FILING DATE

APPLICANT(S)

CLAIM

		ILED	1st AME	TER NDMENT	2nd AME	AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.	
1			<u> </u>	ļ	<u> </u>	ļ	
2	. 1		ļ	ļ	ļ	ļ <u>.</u>	
3	<u> </u>			ļ	ļ	ļ	
4			ļ	ļ	ļ		
5			<u> </u>	ļ	<u> </u>	ļ	
6			<u> </u>		<u> </u>	<u> </u>	
7		ļ			<u> </u>	<u> </u>	
8		ļ	ļ	ļ			
9		<u> </u>	1	ļ	ļ	<u> </u>	
10		ļ	1	<u> </u>	ļ <u>.</u>	ļ	
11		<u> </u>	ļ	ļ	ļ	 	
12		<u> </u>	<u> </u>		<u> </u>	ļ	
13		<u> </u>	<u> </u>				
14		 	<u> </u>	ļ	ļ	1	
15		<u> </u>	_	ļ	ļ	ļ	
16		ļ		<u> </u>			
17			<u> </u>	ļ	<u> </u>		
18		ļ	↓		ļ	_	
19		ļ		ļ		<u> </u>	
20			<u> </u>	ļ		ļ	
21			ļ		<u> </u>		
22			<u> </u>	<u> </u>	<u> </u>	ļ	
23		1				<u>.</u>	
24			1		1		
25							
26							
27							
28							
29		1					
30							
31							
32		1	1	1	1	1	
33		1	1		1	1	
34		1	1	1	İ		
35		1	1	1	1		
36			1	1	1	1	
37		1		1	1	1	
38		1		1	1	-	
39	-		1	1	1	1	
40		1	1		1	1	
41		1	1	1	1	1	
42		1	1	1	1	1	
43		1	1	1		1	
44		 	1	1	1	1	
45		1	 		1		
46		1	 		1	 	
47		1-	1	+ -	+	1	
48	·	+	 		-	+	
49	├──		 		- 		
50	 	1	+	┪		+	
TOTAL	 	 	+-	-	+	+	
IND.	3 0 3	╛┋		╛ _┻ ╸	L	╛╻╸	
TOTAL DEP.	0	-		-	1	_	
TOTAL CLAIMS	1 3	1080	28	科特特	34	Part 8 15	

	*		*		*	*			
	IND.	DEP.	IND.	DEP.	IND.	DEP.			
51	ļ								
52		<u> </u>							
53	<u> </u>								
54	ļ <u>.</u>								
55	<u> </u>	<u> </u>							
56									
57									
58									
59									
60									
61	<u> </u>		<u> </u>						
62		<u> </u>							
63									
64									
65	l								
66			<u> </u>						
67									
68									
69									
70									
71									
72									
73									
74									
75									
76					}				
77									
78					}				
79									
80									
81									
82									
83	}								
84									
85	Ì								
86									
87]								
88									
89									
90						<u> </u>			
91	l		<u> </u>]					
92		<u> </u>	<u> </u>	<u> </u>					
93]	<u> </u>]						
94		<u> </u>							
95	1]	<u> </u>			
96				<u> </u>	1				
97		1							
98	1		<u> </u>		 				
99									
100									
TOTAL IND.	1	1			1				
TOTAL	 			—		—			
DEP.	 	1539363	 	DANNE.	1	1020 84			
YOYAL CLAIMS	1	14300	<u> </u>	XXXX	1	機能			

*MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

U.S.DEPARTMENT OF COMMERCE Patent and Trademark Office

FORM PTO-1360 (REV 3-78)

- CANADA